

BEST AVAILABLE COPY

SERIAL NO. 09771863 FILING DATE 07-29-01

APPLICANT(S)

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2		✓				
3		✓				
4		✓				
5		✓				
6		✓				
7						
8		✓				
9		✓				
10		✓				
11		✓				
12		✓				
13		✓				
14		✓				
15		✓				
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						
32						
33						
34						
35						
36						
37						
38						
39						
40						
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	3					
TOTAL DEP.	12	↔	↔	↔		
TOTAL CLAIMS	15					